

Record Search Request



Planning & Development

Building & Permit Services
99 West 10th Ave.
Eugene, OR 97401

Date _____

(541) 682-5283 Info
(541) 682-5593 FAX
(541) 682-5119 TDD

Street Address (required) _____ Space Number _____

One address per request--exact address required

Applicant Name _____ Daytime Phone No. _____

Representing _____

Mailing Address _____ Zip _____

For what purpose will this information be used? Please be specific. _____

Search Information Requested

Please ☒ one of the following boxes:

☐ All Permits & Inspection Records History for this address

☐ All Permits & Inspection Records History and plans for this address

☐ I am looking for Specific Information. Please ☒ the information type needed

___ Date Specific (Month) _____ (day) _____ (year) _____

___ Permit Type Specific

___ Building

___ Electrical

___ Plumbing

___ Mechanical

___ Site Plan

___ Pellet /Wood Stove or Insert Permit

___ Underground Tank /1989 to present only

(The Fire Marshal's office 682-5411, has a significant amount of data from 1979 to present. Additional fees may apply)

☐ I need Copy of Plans Only

☐ Commercial (Commercial Plans are microfilmed and kept on file once project is completed)

☐ Residential (Residential Plans are retained for 2 yrs. after project is completed and then destroyed)

☐ I would like to view all material found. Please contact (name) _____ for an appointment (phone) _____

Please read and sign: I understand there is a minimum \$20.00 **non-refundable** charge for each address request and that there will be an additional charge for copies (*see price list on reverse*). **I understand that it is possible that no records or documentation for the address indicated may be found during the records search, and that microfiche print quality may be poor or unreadable. Material protected by COPYRIGHT© may be viewed in person only.** **Please Note: Searches can take up to, or more than, two (2) weeks.**

Signed _____ Date _____ Print Name _____

VISA/MasterCard# _____ Exp.Date _____

Credit Card Billing Address with ZIP Code _____

☐ **Please ☒ after reading and signing**

I understand that additional research time exceeding the \$20 deposit will be charged in 15-minute increments according to staff costs required to perform the work. This normally is \$27.50 per hour, though research by a planner, plans reviewer or other technical staff may be higher.

FEES

The \$20.00 minimum fee that applicant pays applies to research time only

After the first ¾ hour, fees are calculated at \$27.50 per hour (pro-rated in 15 minute increments)

Regular paper copies from photocopier or laserjet:

0-5 pages	free
6+ pages	\$0.25 per page
Oversized documents (Blueprint size)	\$5.00 per page

Color copies & prints \$1.50 per page

Microfiche copies: \$0.75 each

If a project research is extensive, staff will inform you of potential, additional charges. You may then:

1. Schedule an appointment with staff to help select specific records to duplicate at the specified hourly rate.
2. Direct staff to either continue the research at the additional hourly rate, or
3. Discontinue the research.

Research requests will be accepted by mail, in person, or by FAX and must be accompanied by a \$20.00 minimum fee. Requests must have the following items noted on the request form: VISA or MasterCard numbers, expiration date of credit card and billing address (including zip code).

Completed research requests may be:

1. Picked up at the Permit & Information Center at 99 W.10th Avenue. Fees for any additional research time and copies will be collected when requested information is picked up.
2. Mailed to the customer after the appropriate postage and handling charges are paid. Shipping methods for larger plans will need to be arranged by customer.

For Office Use Only

Completed on _____ By (initials) _____

Customer Contacted on _____

Appointment Date and Time (if any) _____

☐ Appointment date and time _____

Fees

_____ Research after first ¾ hour _____

_____ Copies @ \$0.25 each _____

_____ @ \$5.00 per large copy _____

_____ @ \$0.75 per small microfiche _____

Total Additional Fees _____

RESULTS

APTWin _____

CEAPHist _____

MicroFiche _____

Other _____